

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

Name of Committee Shelley Buffington
Address P.O. Box 424, Collins, MS 39428
Telephone 601-765-4344 Fax _____
Treasurer Herald Buffington Email _____



☐ Check here if above is different from previous report

TYPE OF REPORT

- ____ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory
- ____ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory
- ____ July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory
- ☒ October 8, 2010 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory
- ____ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory
- ____ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates
- ____ January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory
- ____ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-Itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 2600 ²⁵ + \$ 3800 ²⁵	\$ 6400.00	\$ 6400.00
Total amount of disbursements	\$ 3442 ²⁵ + \$ 740 ²⁵	\$ 4182.75	\$ 4182.75
Total amount of cash on hand		\$ 2217.25	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Deirdre Buffington
Signature of Director or Treasurer

10/8/2010
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-676-2819.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Herald Martin</u>		<u>9/14/10</u>	\$ <u>600⁰⁰</u>
Mailing Address <u>P.O. Box 98</u>		_ _ / _ _ / _ _	\$
City, State, Zip Code <u>Taylorsville, Ms 39128</u>		_ _ / _ _ / _ _	\$
Name of Employer (Required) <u>Self</u>		_ _ / _ _ / _ _	\$
Occupation (Required) <u>attorney</u>		Aggregate year-to-date	\$ <u>600⁰⁰</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Rance N. Ullmar</u>		<u>9/14/10</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>P.O. Box 1</u>		_ _ / _ _ / _ _	\$
City, State, Zip Code <u>Bay Springs, Ms 39422</u>		_ _ / _ _ / _ _	\$
Name of Employer (Required) <u>Self</u>		_ _ / _ _ / _ _	\$
Occupation (Required) <u>attorney</u>		Aggregate year-to-date	\$ <u>500⁰⁰</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>B. Scott Bulfinch</u>		<u>9/14/10</u>	\$ <u>1,000⁰⁰</u>
Mailing Address <u>P.O. Box 477</u>		_ _ / _ _ / _ _	\$
City, State, Zip Code <u>Prentiss Ms 39474</u>		_ _ / _ _ / _ _	\$
Name of Employer (Required) <u>Self</u>		_ _ / _ _ / _ _	\$
Occupation (Required) <u>attorney</u>		Aggregate year-to-date	\$ <u>1,000⁰⁰</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Martha Stubbs</u>		<u>9/14/10</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>P.O. Box 157</u>		_ _ / _ _ / _ _	\$
City, State, Zip Code <u>Queen Den Hall, Ms 39114</u>		_ _ / _ _ / _ _	\$
Name of Employer (Required) <u>Stubbs Law Office</u>		_ _ / _ _ / _ _	\$
Occupation (Required) <u>Legal ass. staff</u>		Aggregate year-to-date	\$ <u>500⁰⁰</u>

Name of Candidate or Committee Committee to Elect Larry Buffington
 Reporting period 7/1/2010 through 9/30/2010

ITEMIZED DISBURSEMENTS

A. Full name <u>Pickoff Printing</u>		Date (Mo., Day, Year) <u>9/2/10</u>	Amount of each disbursement this period \$ <u>1417.75</u>
Mailing Address <u>P.O. Box 337</u>			\$
City, State, Zip Code <u>Raymond Ms 39154</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>1417.75</u>
B. Full name <u>Magee Courier</u>		Date (Mo., Day, Year) <u>9/24/2010</u>	Amount of each disbursement this period \$ <u>1650.00</u>
Mailing Address			\$
City, State, Zip Code <u>Magee, Ms</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Purpose of Disbursement (Optional) <u>Campaign ads & push cards</u>		Aggregate Year-to-date	\$ <u>1650.00</u>
C. Full name		Date (Mo., Day, Year) <u>9/24/10</u>	Amount of each disbursement this period \$ <u>375.00</u>
Mailing Address			\$
City, State, Zip Code <u>Raleigh, Ms</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Purpose of Disbursement (Optional) <u>Political ads</u>		Aggregate Year-to-date	\$ <u>375.00</u>
D. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code		<u>1</u> <u>1</u> <u>1</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
E. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code		<u>1</u> <u>1</u> <u>1</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
F. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code		<u>1</u> <u>1</u> <u>1</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$